

Client: Example Client ABC123 123 Test Drive Salt Lake City, UT 84108 UNITED STATES

Physician: Doctor, Example

Patient: Patient, Example

DOB	Unknown	
Gender:	Female	
Patient Identifiers:	01234567890ABCD, 012345	
Visit Number (FIN):	01234567890ABCD	
Collection Date:	00/00/0000 00:00	

Maternal Contamination Study Fetal Spec	Fetal Cells Single fetal genotype present; no maternal cells present. Fetal and maternal samples were tested using STR markers to rule out maternal cell contamination.		
Maternal Contam Study, Maternal Spec	whole Blood		
KEL Genotype, Fetal Specimen	Cultured CVS		
KEL Genotype Fetal, Interpretation	κ/k		
	Indication for testing: Determine fetal Kell genotype to assess risk for alloimmune hemolytic disease.		
	Fetal Kell genotype: K/k		
	Interpretation: One copy of the KEL*01 (K) allele and one copy of the KEL*02 (k) allele were detected in this fetal sample. This genotype is predictive of a Kell positive phenotype (also referred to as K+k+) in this fetus. If the pregnant patient is sensitized to K antigen, this fetus is predicted to be at risk for anti-K-mediated alloimmune hemolytic disease.		
	This result has been reviewed and approved by		

Kell K/k (KEL) Antigen Genotyping, Fetal

H=High, L=Low, *=Abnormal, C=Critical

Unless otherwise indicated, testing performed at:



BACKGROUND INFORMATION: Kell K/k (KEL) Antigen Genotyping, Fetal CHARACTERISTICS: Erythrocyte alloimmunization may result in hemolytic transfusion reactions or hemolytic disease of the fetus and newborn (HDFN). K ANTIGEN FREQUENCY: 9 percent of Whites, 2 percent of African Americans, rare in Asians. INHERITANCE: Co-dominant. CAUSE: Antigen-antibody mediated red-cell hemolysis between donor/recipient or transferred maternal antibodies. POLYMORPHISM TESTED: Kell blood group KEL*01 (K), KEL*02 (k): c.578C>T, p.Thr193Met. The presence of KEL*01 allele predicts a K positive phenotype. CLINICAL SENSITIVITY: 99 percent. METHODLOGY: Immucor PreciseType(TM) HEA Molecular BeadChip which is FDA-approved for clinical testing/Polymerase Chain Reaction (PCR)/Fragment Analysis. ANALYTIC SENSITIVITY AND SPECIFICITY: 99 percent. LIMITATIONS: Bloody amniotic fluid samples may give false-negative results because of maternal cell contamination. Rare nucleotide changes leading to altered or partial antigen expression and null phenotypes are not detected by this assay. Patients who have had hematopoietic stem cell transplants may have inconclusive results on this test. Abnormal signal intensities may result in indeterminate genotyping results. This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

Counseling and informed consent are recommended for genetic testing. Consent forms are available online.

VERIFIED/REPORTED DATES					
Procedure	Accession	Collected	Received	Verified/Reported	
Maternal Contamination Study Fetal Spec	23-235-103471	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00	
Maternal Contam Study, Maternal Spec	23-235-103471	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00	
KEL Genotype, Fetal Specimen	23-235-103471	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00	
KEL Genotype Fetal, Interpretation	23-235-103471	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00	

END OF CHART

H=High, L=Low, *=Abnormal, C=Critical

Unless otherwise indicated, testing performed at:

ARUP LABORATORIES | 800-522-2787 | aruptab.com 500 Chipeta Way, Sait Lake City, UT 84108-1221 Jonathan R. Genzen, MD, PhD, Laboratory Director Patient: Patient, Example ARUP Accession: 23-235-103471 Patient Identifiers: 01234567890ABCD, 012345 Visit Number (FIN): 01234567890ABCD Page 2 of 2 | Printed: 8/28/2023 4:59:15 PM 4848